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August 24, 2004

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| To: Assistant Commissioner for Patents | From: Estella Pineiro Patent Administrator 818/493-2251 | 4 2004 () |
|---|---|-----------------------|
| Attention: Examiner: F. Oropeza, Art Unit 3762 TECHNOLOGY CENTER 3700 | ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221 | |
| Telecopier: 703/872-9306 | Telecopier: 818/362-4795 | |
| RE: Filing of Request for Continued Examination (RCE) | Number of pages being sent: 3 (including cover page) | |
| Serial No. 09/964,225 | | |
| Filed: 09/25/2001 | | |
| Our Docket No. A01P1032 | | |

PLEASE DELIVER TO EXAMINER F. Oropeza, Art Unit 3762. Thank you.

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PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
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| FEE TRANSMITTAL | | | | | | | 100/004 | /964,225 | | | |
| - : | | | | replication realised | | | | 09/25/2001 | | | |
| for FY 2004 | | | | Timing Butto | | | | aurence S. Sloman | | | |
| Effective 10/01/2003. Patent fees are subject to annual revision. | | | | This item of inventor | | | F. Orop | | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | ŀ | | | | | <u></u> | _ | | |
| TOTAL AMOUNT OF PAYMENT (\$) 880 | | | | 40404 | | | | 122 | | | |
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| METHOD OF PAYMENT (check all that apply) | | | | FEE CALCULATION (continued) | | | | | | | |
| Check Credit card Money Other None 3. ADDITIONAL FEES | | | | | | | S | | | | |
| Deposit Account: | | | | Large Entity Small Entity Fee Fee Fee Fee Fee Description | | | | | | | |
| Deposit Account 16-00 | 168 | | Code | (\$) | Code | (\$) | | • | | Fee Pald | |
| Number | | | 1051 | | 2051 | | Surcharge - late | _ | | | |
| Deposit Account Name | SETTER, INC. | | 1052 | | 2052 | | Surcharge - late cover sheet | • | IS 100 OI | | |
| The Director is authorized | i to: (check <u>all</u> that a | pply) | 1053 | | 1053 | | Non-English spe For filing a reque | | te reexamination | | |
| Charge fee(s) indicated | below Cre | dit any overpayments | 1804 | 2,520 920° | 1804 | | Requesting publ | | | | |
| Charge any additional fe | | - | | | ļ. | | Examiner action | | | | |
| Charge fee(s) indicated to the above-identified depo | | ne filing fee | 1805 | 1,840* | 1805 1 | 1,840* | Requesting pub Examiner action | | R after | | |
| ····· | CALCULATIO | v | 1251 | 110 | 2251 | 55 | Extension for re | | | 110 | |
| 1. BASIC FILING FE | | | 1252 | 420 | 2252 | 210 | Extension for re | eply within se | cond month | | |
| Large Entity Small Entity | | Fac Bald | 1253 | | 2253 | 475 | Extension for re | ply within thi | rd month | | |
| Fee Fee Fee Fee Code (\$) | Fee Description | Fee Paid | 1254 | 1,480 | 2254 | 740 | Extension for re | | | | |
| 1001 770 2001 385 | Utility filing fee | r | 1255 | 2,010 | 2255 | 1,005 | Extension for re | ply within fift | h month | | |
| 1002 340 2002 170 | Design filing fee | , | 1401 | 330 | 2401 | 165 | Notice of Appea | al | | | |
| 1003 530 2003 265 | Plant filing fee | | 1402 | | 2402 | | Filing a brief in | | appeal | | |
| 1004 770 2004 385 | Reissue filing fe | e | 1403 | 290 | 2403 | 145 | Request for ora | I hearing | | | |
| 1005 160 2005 80 | Provisional filin | g fee | | 1,510 | 1451 | | Petition to Institu | • | | | |
| 1 | SUBTOTAL (1) | (\$) | 1452 | | 2452 | | Petition to revive | | | | |
| 2. EXTRA CLAIM FE | ES FOR UTILIT | Y AND REISSUE | = I | 1,330 | 2453 | | Petition to reviv | | onal | | |
| | Extra Claims | Fee from Fee Palo | . 1301 | 1,330 480 | 2501 2502 | | Utility issue fee Design Issue fe | • | | | |
| Total Claims . | .20** = X | 18 = | 1503 | | 2503 | | Plant issue fee | | | | |
| Independent Claims | - 3** = X | 86 = | 1460 | | 1460 | | Petitions to the | | er | | |
| Multiple Dependent | | = | 1807 | | 1807 | | Processing fee | | | | |
| Large Entity Small Ent | tity | | 1806 | | 1806 | | Submission of I | | | | |
| Fee Fee Fee Fe Code (\$) Code (\$ | e <u>Fee Descri</u> | otion | 8021 | | 8021 | | Recording each | patent assig | nment per | | |
| 1202 18 2202 | y 9 Claims in exce | ess of 20 | 1 | | | | property (times | unuper of br | roperties) | | |
| 1201 86 2201 | _ | laims in excess of 3 | 1809 | 770 | 2809 | 385 | Filing a submiss (37 CFR 1.129) | | n rejection | | |
| 1203 290 2203 | 145 Muitiple deper | dent claim, if not paid | 1810 | 770 | 2810 | 385 | For each addition | onal invention | to be | | |
| 1204 86 2204 | 43 ** Reissue ind over origina | ependent claims | 180 | 1 770 | 2801 | 385 | examined (37 C | | = | 770 | |
| 1205 18 2205 | - | ims in excess of 20 | 180 | | 1802 | | Request for ex | xpedited exar | | | |
| and over original patent | | | | of a design application | | | | | | | |
| SUBTOTAL (2) (\$) | | | | Other fee (specify) | | | | | | <u> </u> | |
| "or number previously paid, if greater, For Reissues, see above | | | | | | | | | | | |
| SUBMITTED BY | 1112 | | | | | | | (Complete (| if applicable)) | | |
| Name (Print/Type) | TARROTTOWAGERD | | | | | | ,179 | Telephone | 818/493-3157 | | |
| Signature Folial & Tamers | | | | | | | | Date | 8/24 6 | Y | |

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